


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2007 8:00 am**  
**Secretary of State**

04-11-2007 90034 029 \*\*\*\*61.25

<b>DOCUMENT # 761780</b> 1. Entity Name <b>BONITA BEACH OWNERS ASSOCIATION, INC.</b>																																																																																																																																									
Principal Place of Business <b>105 PEACHTREE DRIVE LYNN HAVEN, FL 32444</b>			Mailing Address <b>105 PEACHTREE DRIVE STE 302 LYNN HAVEN, FL 32444</b>																																																																																																																																						
2. Principal Place of Business - No P.O. Box #			3. Mailing Address																																																																																																																																						
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																																																																																																						
City & State			City & State																																																																																																																																						
Zip		Country		Zip																																																																																																																																					
Country		Country		4. FEI Number <b>59-2222825</b>																																																																																																																																					
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>																																																																																																																																					
6. Name and Address of Current Registered Agent  <b>FRENCH, W. GREGORY CPA 105 PEACHTREE DR LYNN HAVEN, FL 32444</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																																																																																																																																					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																																																																																																																																									
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																									
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																																																																																																																																					
Make check payable to: <b>Florida Department of State</b>																																																																																																																																									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																									
<b>SIGNATURE:</b> <u>Gregory C. Toop</u> <span style="float: right;">Feb 13, 2007 850-624-5468</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																																									

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